



Coordinated Care Initiative (CCI)/ Cal MediConnect Advisory Committee

Wednesday, March 4, 2015

Member Attendance: James Beaubeaux, San Diego County Medical Society (SDCMC); Lauren Chin, Behavioral Health Services; Amber Cutler, Justice in Aging; Joe Diaz, California Association of Healthcare Facilities (CAHF); Chris Duke, Aging and Independence Services (AIS); Kim Fritz, Care1st; Lisa Hayes, Molina Healthcare; Walter Hekimian, Edgemoor; Pam Hough, Light Bridge Hospice; Pam Hoyer, Dual Eligible Consumer; Carol Hubbard, Program of All-Inclusive Care for the Elderly (PACE); Kim Huynh, Harbage Consulting; Molly Kintz, Loving Care Adult Day Health Care (CBAS); Greg Knoll, Consumer Center for Health Education and Advocacy (CCHEA); Jenel Lim, AIS; Rogelio Lopez, Health Net; Jenna MacRae, Elder Law and Advocacy-HICAP; Sabra Matovsky, Molina Healthcare; Pamela Mokler, Care1st; Bud Sayles, In-Home Supportive Services Public Authority (IHSS); Brenda Schmitthenner, AIS; George Scolari, Community Health Group; Mark Sellers, AIS; Peter Shih, HSD-HSSA; Noah Solomon, Care1st; Ann Thompson, Kaiser Permanente and Judith Yates, Hospital Association of San Diego and Imperial Counties (HASDIC).

Guest Attendance: Valeria Arita, Access to Independence; Terrance Henson, Molina Healthcare; Rick Mendlen, Light Bridge Hospice and Kimberly Williams, Assistant to Pam Hoyer.

Welcome and Introductions

Additions to the Agenda

- None.

Review and Approval of the February 4, 2015 Meeting Minutes

- The February 4, 2015 meeting minutes were approved as written.

Consumer Advisory Committee Membership Recruitment

- Consumer participation is still needed.
- Nominations are requested from the advisory committee members.

CCI Consumer Feedback Updates

- Ombudsman
 - In February, the total calls received by the Statewide Health Consumer Alliance were 2,009; 611 calls originated in San Diego.
 - Average wait time – 14 seconds
 - Average talk time – 6 minutes, 35 seconds
 - Year-to-date – 4,210 calls for San Diego
 - January call totals in other demonstration counties:
 - Los Angeles – 596
 - San Bernardino/Riverside – 171
 - Bay Area – 195
 - Orange County – 26
 - San Mateo – 15
 - All other programs – 110
 - Common consumer questions

- Cal MediConnect program rules
 - Health plan choices
 - Common concerns and service requests
 - Expediting disenrollment
 - Advocating continuity of care with providers and plans for urgent medical services
 - Cal MediConnect service denials and delays
 - The Consumer Center for Health, Education and Advocacy (CCHEA) assists newly enrolled Cal MediConnect beneficiaries in a variety of ways, including helping those experiencing difficulty with transitions of care, and assistance in accessing immediate services through appeals or by filing grievances.
 - It was noted disruptions caused by a delayed update of Cal MediConnect eligibility in point-of-service systems used by providers were easily resolved.
 - The Ombudsmen continues to work to add or remove Medi-Cal Other Health Codes (OHC) to ensure beneficiaries are correctly identified in the Medi-Cal Eligibility Data System (MEDS). An error code can impede appropriate Cal MediConnect enrollment or can lead to inappropriate enrollment of excluded beneficiaries.
 - Greg Knoll will convene with the California Department of Health Care Services (DHCS) twice a month through May to discuss Cal MediConnect program issues.
 - Greg Knoll will also participate in the SCAN Evaluation Group in Oakland in March. He will be reporting on the unique barriers specific to entities such as hospitals and Skilled Nursing Facilities (SNFs).
 - Suggestions offered by the Advisory Committee for improvement of the Cal MediConnect program:
 - Addition of agents to assist with member enrollment.
 - Improve advertising or marketing of the program.
 - Promote stories of success from Community Based Adult Services (CBAS), In-Home Supportive Services (IHSS), Multipurpose Senior Services Program (MSSP), Program of All-Inclusive Care for the Elderly (PACE) and other long term services and support entities.
 - Identifying strategies to encourage non-contracted providers to participate in the Advisory Committee.
- HICAP
 - Contact was made with 735 clients.
 - Clients continue to express confusion about the Cal MediConnect program.
 - Clients with other forms of health insurance reported still receiving notices.
- CCI Advisory Committee Members
 - Issues have arisen regarding unpaid claims for St. Paul's Skilled Nursing Facility. Unpaid claims will be directed to each health plan's representative.
 - DMEs (Pam Hoyer)
 - Discussed issues surrounding durable medical equipment (DME) vendor practices.
 - It was noted single DME vendor contracts give that vendor a monopoly, turning easy repairs into major purchases.
 - A suggestion was made to allow consumer choice to encourage competition among DME vendors, especially with respect to special items.
 - It was recommended DME vendors should become a mandatory part of continuity of care.

CCI Updates

- CCI Health Plans
 - Molina has experienced an increase in members dropping and raised a concern that members may be losing Medi-Cal eligibility thus impacting Cal MediConnect eligibility.
 - There is discussion at the State level concerning integrating a deeming period for Medi-Cal members enrolled in Cal MediConnect. During the deeming period the health plans would assume the risk of keeping members enrolled in Cal MediConnect.
 - It was noted automatic disenrollments without a deeming period and difficulties linked to re-enrollment may turn consumers away.
- Harbage Consulting (Regional Coordinator and Technical Advisor)
 - Outreach was made to four provider groups (including Sharp and Neighborhood Healthcare), three advocacy groups (including AARP and Telecare Wise) and two pharmacies.
 - Cal MediConnect program information was distributed at the United Domestic Workers of America (UDW) quarterly meeting and 1,000 flyers were distributed through Meals on Wheels.
 - Training information was presented at four SNF's and 15% of the SNF's contacted want to receive training on the Cal MediConnect program.
 - Harbage Consulting is considering a summit in San Diego similar to that of Los Angeles.
- Skilled Nursing Facilities (SNF) Workgroup Update
 - Forty-six representatives from skilled nursing facilities participated in the most recent SNF meeting.
 - Discussion focused on billing issues and the Memorandum of Understanding (MOU) for emergency evacuations.
 - A letter of intent was drafted for all health plans to sign. The letter will supplement the amended MOU.
 - All health plan corporate offices were contacted concerning the State's release of AB-1629 rates that allow for the negotiation of rates between health plans and individual facilities.
 - The State issued notification concerning an error in the calculations for property reinstatement rates; a revision will be issued within 10 business days.
- Healthy San Diego Behavioral Health Workgroup Meeting Update
 - Discussion focused on the 190-day rule in which Medicare beneficiaries can only receive services at a free standing psychiatric hospital for a maximum of 190 days. Any services beyond 190 days are only covered for medical hospitals with a behavioral health unit.
 - The State has been asked to clarify with CMS (Centers for Medicare and Medicaid Services) as to why it matters what institution health plans pay when health plans are the entities financially responsible.
 - All health plans agreed that if there is a change in the patient's insurance during the course of treatment at a facility, the patient's former insurance is still financially responsible for the remainder of the treatment.
 - Representatives from DHCS will be participating in the next Behavioral Health Workgroup (BHWG) meeting to discuss issues surrounding the inpatient detox benefit.
 - Mike Phillips, an attorney and director of the Patient Advocate Program, will be presenting information at the next BHWG meeting concerning grievances filed by patients held in psychiatric care against their will or mistreatment received in psychiatric facilities.
 - The National Alliance for Mental Illness (NAMI) will be holding a benefit event and seeks sponsorship from organizations and Health Plans.
- Community Based Adult Services (CBAS) Update
 - Discussion focused on expediting the process for Health Assessment Forms.

- The health plans proposed distributing forms for providers to have on hand, ready to complete and send.
 - San Diego CBAS centers will be collaborating to create a standardized Health Assessment Form to distribute.
- The Incidence and Discharge Reporting Forms have been standardized by DHCS.
- CBAS is asking for written communication from the health plans concerning the information health plans require for members that disenroll.
- Communication Workgroup Update
 - San Diego County CCI Rollout Tracker
 - The CCI Rollout Tracker for January was distributed to the Advisory Committee.
 - March will be the last month a report will be requested for the CCI Rollout Tracker as passive enrollment comes to an end.
 - Cal MediConnect Enrollment Dashboard Report
 - A copy of the report has been distributed to the Advisory Committee.
 - HRA Completion Dashboard
 - Community based organizations are asked to support health plans by locating individuals that are difficult to reach, encouraging individuals to participate in the health risk assessment and providing member contact information for the completion of the health risk assessment.
 - TeleTownhall Update
 - Another Teleforum will be held focusing on providing information concerning the coordinated care initiative and the Cal MediConnect program opportunities and participation.
 - The Communication workgroup will work on creating a new script.
 - CCI Success Stories
 - The next series of success stories are requested from community based organizations and long term services and support entities to offer a broader Coordinated Care Initiative snapshot not only focusing on Cal MediConnect.
- Long Term Services and Supports (LTSS) Update
 - Health Plans, IHSS and MSSP staff focused on clarifying the process for Information and Communication Technologies (ICTs), a pilot process which is expected to run for 60 days.

Updates from the 1115 Waiver and Health Home Discussions

- DHCS has reviewed approximately 90% of submissions and are open to ideas from San Diego.
- Discussion has focused on gathering people from all spectrums that can be used as examples of incurred savings to be presented to CMS.
- There are 1,750 people identified as homeless in the San Diego Community Information Exchange (CIE) database. There are three data systems tracking homeless information and work will focus on consolidating all three sets of data.
- Efforts will focus on clarifying the concepts that fall under the 1115 Waiver and Health Homes to identify the appropriate source of funding.

Suggested April Meeting Agenda Items

- None.

Next Meeting

The next meeting will be held on April 1, 2015 from 9:30am–11:30am at the San Diego County Medical Society.

Meeting minutes transcribed by Aracely Soriano